Application Data She t

Application Information

Application Type:: Regular

Subject Matter:: Utility

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R?:: None

Number of CD disks::

Number of Copies of CDs::

Sequence Submission?:: None

Computer Readable Form (CRF):: No

Number of copies of CRF:: 0

Title:: THROTTLE VALVE ARRANGEMENT

Attorney Docket Number:: 2001P80113WOUS

Request for Early No

Publication?::

Request for Non-Publication?:: No

Suggested Drawing Figure:: 1

Total Drawing Sheets:: 1

Small Entity?:: No

Latin Name::

Variety Denomination Name::

Petition Included?:: No

Petition Type::

Licensed US Gov't Agency::

Contract or Grant Numbers::

Secrecy Order in Parent No

Appl.?::

Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: GERMANY

Status:: Full Capacity

Given Name:: HANS-ULRICH

Middle Name::

Family Name:: VOGLER

City of Residence:: FRANKFURT/MAIN

State or Province of

Residence::

Country of Residence:: GERMANY

Street of Mailing Address:: ENKHEIMER STRASSE

11

City of Mailing Address:: FRANKFURT/MAIN

State or Province of Mailing Address::

Country of Mailing Address:: GERMANY

Postal or Zip Code of Mailing Address:: 60385

Applicant Authority Type:: Inventor

Primary Citizenship Country::

Status:: Full Capacity

Given Name::

Middle Name::

Family Name::

City of Residence::

State or Province of

Residence::

Country of Residence::

Street of Mailing Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address:: Applicant Authority Type:: Inventor Primary Citizenship Country:: Status:: Full Capacity Given Name:: Middle Name:: Family Name:: City of Residence:: State or Province of Residence:: Country of Residence:: Street of Mailing Address:: City of Mailing Address:: State or Province of Mailing Address:: Country of Mailing Address:: Postal or Zip Code of Mailing Address:: Applicant Authority Type:: Inventor Primary Citizenship Country:: Status:: Full Capacity Given Name:: Middle Name:: Family Name:: City of Residence:: State or Province of Residence:: Country of Residence:: Street of Mailing Address::

City of Mailing Address::

Country of Mailing Address::

State or Province of Mailing Address::

O

-3-

Postal or Zip Code of Mailing Address::

Applicant Authority Type:: Inventor

Primary Citizenship Country::

Status:: Full Capacity

Given Name::
Middle Name::
Family Name::

City of Residence::

State or Province of

Residence::

Country of Residence::

Street of Mailing Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::

Correspondence Information

Correspondence Customer

28204

Number::

Representative Information

| Representative Customer | 28204 | |
|-------------------------|-------|--|
| Number:: | | |

Domestic Priority Information

| Application:: | Continuity | Parent | Parent Filing |
|------------------|-----------------|----------------|---------------|
| | Type:: | Application:: | Date:: |
| This application | Continuation of | PCT/DE02/03041 | 8/19/02 |
| | | | |

Foreign Priority Information

| Country:: | Application | Filing Date:: | Priority |
|-----------|--------------|---------------|-----------|
| | Number:: | | Claimed:: |
| DE | 101 40 410.7 | 8/23/01 | Yes |
| | | | |

Assignment Information

Assignee Name::

SIEMENS AG

Street of Mailing Address:: P.O.Box 22 16 34

City of Mailing Address::

MUNICH

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address:: 80506